						12/11/19 12:07PM
Fill i	n this information to	identify your	case:			
Debt	or 1 Erni	e Donshay Mi	iller			
	First N		Middle Name	Last Name		
Debt	or 2 se if, filing) First N	ama	Middle Name	Last Name		
	3,					
Unite	ed States Bankruptcy	Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
1	number					
(if kno	wn)					k if this is an
					amen	ided filing
Off	icial Form 10	06Sum				
Sur	nmary of You	r Assets a	and Liabilities ar	nd Certain Statistical Information		12/15
				are filing together, both are equally responsible f	or supplyi	ng correct
				ne information on this form. If you are filing amend	led schedu	iles after you file
your	original forms, you	must fill out a i	new Summary and check	k the box at the top of this page.		
Part	1: Summarize Yo	ur Assets				
					Your a	issets
					Value	of what you own
1.	Schedule A/B: Prop	perty (Official Fo	orm 106A/B)			
	1a. Copy line 55, To	tal real estate, fr	om Schedule A/B		\$	0.00
	1b. Copy line 62, To	tal personal prop	perty, from Schedule A/B		\$	34,780.00
			0 1 1 1 1 1 7			
	1c. Copy line 63, To	tal of all property	on Schedule A/B		\$	34,780.00
Part	2: Summarize Yo	ur Liabilities				
					Vour I	iabilities
						nt you owe
2.	Schedule D: Credito	rs Who Have Cl	aims Secured by Property	(Official Form 106D)		
۷.				the bottom of the last page of Part 1 of Schedule D	\$	50,167.00
3.	Schedule E/E: Credi	tors Who Have	Unsecured Claims (Officia	Form 106F/F)		
0.				is) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total c	aims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule E/F	\$	212,397.00
	ob. Copy the total of	anno nom r arr	- (nonphonity unocoured of	idinis) from the of or correduce 2/7	Ψ	212,337.00
				Varintatal liabilities	•	000 504 00
				Your total liabilities	 	262,564.00
Part	3: Summarize Yo	ur Income and	Expenses			
4.	Schedule I: Your Inc				¢.	5.309.25
	Copy your combined	I monthly incom	e from line 12 of <i>Schedule</i>) I	\$	3,303.23
5.	Schedule J: Your Ex				\$	4,862.00
	Copy your monthly e	expenses from li	ne 22c of Schedule J		Φ	7,002.00
Part	4: Answer These	Questions for	Administrative and Stati	stical Records		
6.	Are you filing for b	ankruptcy unde	er Chapters 7, 11, or 13?			
0.	, ,		• • •	heck this box and submit this form to the court with yo	our other sc	hedules.
				·		
7	Yes	le veu beve?				
7.	What kind of debt of	io you nave?				
				debts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
		e not primarily of		ve nothing to report on this part of the form. Check thi	s box and s	submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information page 1 of 2

Debtor 1 Ernie Donshay Miller

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,182.14

Opp the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	209,856.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	209,856.00

					12/11/19 12:07F
Fill in this info	rmation to identify your	case and this filing:			
Debtor 1	Ernie Donshay M	liller			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT OF	- MISSISSIPPI		
Case number					☐ Check if this is an
					amended filing
Official Fo	orm 106A/B				
Schedu	le A/B: Prop	erty			12/15
hink it fits best. Information. If mo Inswer every que	Be as complete and accura ore space is needed, attach estion.	ate as possible. If two married a separate sheet to this form.	ce. If an asset fits in more than of people are filing together, both a On the top of any additional page. You Own or Have an Interest In	are equally responsible for su	pplying correct
Part I. Describe	e Lacii Residerice, Bulluliig	g, Land, or Other Real Estate i	ou Own or mave an interest in		
. Do you own or	have any legal or equitable	e interest in any residence, bu	ilding, land, or similar property?	•	
No. Go to Pa	art 2.				
☐ Yes. Where	is the property?				
Part 2: Describe	e Your Vehicles				
Part 2. Describe	e rour vernicles				
			cles, whether they are regist		ehicles you own that
omeone else dr	rives. If you lease a vehic	le, also report it on <i>Schedule</i>	e G: Executory Contracts and l	Jnexpired Leases.	
. Cars, vans, t	rucks, tractors, sport ut	tility vehicles, motorcycles	i		
□No					
■ Yes					
- res					
3.1 Make:	Toyota	Who has an interes	st in the property? Check one	Do not deduct secured cl	
Model:	Camry	Debtor 1 only	in the property : encorrence	the amount of any secure Creditors Who Have Clai	
Year:	2017	Debtor 2 only		Current value of the	Current value of the
Approxima	ate mileage: 63	,000 Debtor 1 and De	btor 2 only	entire property?	portion you own?
Other info	rmation:		e debtors and another		
				\$13,880.00	\$13,880.00
		(see instructions)	community property	Ψ13,000.00	φ13,000.00
3.2 Make:	Acura	Who has an interes	st in the property? Check one	Do not deduct secured cl	
Model:	TSX	Debtor 1 only		the amount of any secure Creditors Who Have Clai	
Year:	2012	Debtor 2 only			, , ,
		,000 Debtor 1 and De	btor 2 only	Current value of the entire property?	Current value of the portion you own?
Other info		<u> </u>	e debtors and another		- •
		_		¢ 0 0E0 00	¢0.050.00
		Check if this is (see instructions)	community property	\$8,850.00	\$8,850.00
		(see instructions)			

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Debto	er 1 Ernie D	onshay Miller	Ca	se number (if known)	
3.3	Make: Voll Model: Jett	sswagon a	Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	ed claims on Schedule D:
	Year: 200	7	Debtor 2 only	Current value of the	Current value of the
	Approximate mil	eage: 116,000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other informatio	n:	At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$4,050.00	\$4,050.00
3.4	Make: Hon	da	Who has an interest in the property? Check one	Do not deduct secured cl	
0	Model: Acc			the amount of any secure Creditors Who Have Clai	
	Year: 200		■ Debtor 1 only □ Debtor 2 only		
	Approximate mil		Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other informatio		At least one of the debtors and another	entile property:	portion you own:
	Other informatio		At least one of the deptors and another		
			Check if this is community property (see instructions)	\$3,800.00	\$3,800.00
. Ho	ou own or have usehold goods amples: Major a No	and furnishings ppliances, furniture, liner	interest in any of the following items?	!	Current value of the cortion you own? Do not deduct secured claims or exemptions.
-	Yes. Describe.				
		Livingroom, b furnishings	edroom, kitchen, and other household good	s and	\$2,500.00
Ex	includi	ng cell phones, cameras,	ideo, stereo, and digital equipment; computers, printer media players, games	rs, scanners; music collection	ons; electronic devices
		TVs and other	electronics		\$500.00
Ex	other o	es and figurines; paintings ollections, memorabilia, o	s, prints, or other artwork; books, pictures, or other art collectibles	objects; stamp, coin, or ba	seball card collections;
. F~	inment for an				
	amples: Sports,	orts and hobbies photographic, exercise, a l instruments	and other hobby equipment; bicycles, pool tables, gol	f clubs, skis; canoes and ka	yaks; carpentry tools;

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					12/11/19 12:07PM
Debtor 1	Ernie Donshay Mille	er		Case number (if known)	
☐ Yes.	Describe				
□ No	ms ples: Pistols, rifles, shotgui Describe	ns, ammunition, an	d related equipment		
	Glock	43			\$400.00
□ No		s, leather coats, de	signer wear, shoes, accessories		
	Clothi	ng and shoes			\$500.00
☐ No		stume jewelry, enga	agement rings, wedding rings, heir	loom jewelry, watches, gems, go	d, silver
	Misce	llaneous jewelry			\$200.00
■ No □ Yes.	Give specific information.	 our entries from	I not already list, including any I		\$4,100.00
	escribe Your Financial Asset				
Do you o	wn or have any legal or e	quitable interest i	n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	ples: Money you have in yo		ome, in a safe deposit box, and or	n hand when you file your petitior	ı
				Cash	\$100.00
Exam _i □ No			counts; certificates of deposit; shar s with the same institution, list eac Institution name:		uses, and other similar
	·	Federal Credit			¢ ስ ስስ
	17.1.	Union	Jackson Area		\$0.00

		19-04390	-NPO	Dkt 3	Filed 12/11/19	Entered 12/11/19 12:09:04	Page 6 of 57
							12/11/19 12:07
De	btor 1	Ernie Donsha	y Miller			Case number (if kr	nown)
18.	Examp	, mutual funds, o oles: Bond funds, i				money market accounts	
	■ No □ Yes		Ir	nstitution o	r issuer name:		
19.	joint v	ublicly traded sto enture	ck and in	iterests in	incorporated and un	incorporated businesses, including an in	terest in an LLC, partnership, and
	■ No						
	⊔ Yes.	Give specific info		bout them. e of entity:		% of ownership:	
20.	Negoti	iable instruments i	nclude pe	rsonal che	ecks, cashiers' checks,	n-negotiable instruments promissory notes, and money orders. one by signing or delivering them.	
		Give specific infor	mation ab	out them			
	— 100.	Cive opeomo mior		er name:			
	<i>Examp</i> □ No	nent or pension a ples: Interests in IR List each account	RA, ERISA separatel	A, Keogh, 4 ly.		rings accounts, or other pension or profit-sh	aring plans
			Type of	account:	Institution	on name:	
			PERS		State I	Retirement	Unknown
	Your s <i>Examp</i> ■ No		deposits	you have i	aid rent, public utilities (continue service or use from a company electric, gas, water), telecommunications con name or individual:	mpanies, or others
23.	_	ies (A contract for	a periodic	c payment	of money to you, eithe	r for life or for a number of years)	
	■ No □ Yes	lss	uer name	and descr	iption.		
24.	Interest 26 U.S.	ts in an education C. §§ 530(b)(1), 52	n IRA, in a 29A(b), ar	an accour nd 529(b)(nt in a qualified ABLE 1).	program, or under a qualified state tuitio	n program.
	■ No □ Yes	Inst	titution na	me and de	escription. Separately fi	e the records of any interests.11 U.S.C. § 5	21(c):
	■ No	, equitable or futu		·		hing listed in line 1), and rights or power	s exercisable for your benefit
	_						

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☐ Yes. Give specific information about them...

27. **Licenses, franchises, and other general intangibles** *Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

 $\hfill \square$ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

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Debtor 1	Ernie Donshay Miller		Case number (if known)	12/11/19 12:07PM
28. Tax	refunds owed to you			
□ No ■ Ye		nem, including whether you already filed the	e returns and the tax years	
		Future Tax Returns	Federal	Unknown
		Future EIC refunds	EIC	Unknown
		Future State Refunds		Unknown
Exa ■ No		ny, spousal support, child support, mainten	ance, divorce settlement, property set	tlement
Exa	benefits; unpaid loans you n	urance payments, disability benefits, sick pa nade to someone else	ay, vacation pay, workers' compensa	tion, Social Security
		rance; health savings account (HSA); credit	, homeowner's, or renter's insurance	
	es. Name the insurance company of Company		Beneficiary:	Surrender or refund value:
If you som	neone has died.	ou from someone who has died t, expect proceeds from a life insurance pol	icy, or are currently entitled to receive	property because
	mples: Accidents, employment disp	or not you have filed a lawsuit or made a utes, insurance claims, or rights to sue	a demand for payment	
□ Ye	es. Describe each claim			
■ No		aims of every nature, including counterc	aims of the debtor and rights to se	t off claims
35. Any ■ No	financial assets you did not alrea	dy list		
□Y€	es. Give specific information			
		ntries from Part 4, including any entries f		\$100.00
Part 5:	Describe Any Business-Related Prope	erty You Own or Have an Interest In. List any re	eal estate in Part 1.	

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

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Debt	or 1 Ernie Donshay Miller		Case number (if known)	12/11/19 12:07PM
	Yes. Go to line 38.			
Part (Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Intere	st In.	
46. C	o you own or have any legal or equitable interest in any farm	- or commercial fishir	ng-related property?	
I	No. Go to Part 7.			
I	☐ Yes. Go to line 47.			
Part 1	7: Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
	o you have other property of any kind you did not already list	t?		
	Examples: Season tickets, country club membership No			
	Yes. Give specific information			
	res. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write the	hat number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$30,580.00		· · · · · · · · · · · · · · · · · · ·
57.	Part 3: Total personal and household items, line 15	\$4,100.00		
58.	Part 4: Total financial assets, line 36	\$100.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$34,780.00	Copy personal property total	\$34,780.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$34,780.00

page 6

Fill in this inform	nation to identify your	case:		
Debtor 1	Ernie Donshay M	iller		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI	
Case number _ (if known)				☐ Check if this is an amended filing
				•

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
2017 Toyota Camry 63,000 miles Line from Schedule A/B: 3.1	\$13,880.00	■	100% of fair market value, up to any applicable statutory limit	Miss. Code Ann. § 85-3-1(a)	
2012 Acura TSX 93,000 miles	\$8,850.00			Miss. Code Ann. § 85-3-1(a)	
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit		
2007 Volkswagon Jetta 116,000 miles	\$4,050.00			Miss. Code Ann. § 85-3-1(a)	
Line from Scriedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit		
2005 Honda Accord 223,000 miles Line from Schedule A/B: 3.4	\$3,800.00			Miss. Code Ann. § 85-3-1(a)	
Line from Scriedule A/B: 3.4			100% of fair market value, up to any applicable statutory limit		
Livingroom, bedroom, kitchen, and other household goods and	\$2,500.00		\$2,500.00	Miss. Code Ann. § 85-3-1(a)	
furnishings Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		

Debtor 1	Ernie Donshay Miller			Case number (if known)	
	ef description of the property and line on needule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption
	s and other electronics	\$500.00		\$500.00	Miss. Code Ann. § 85-3-1(a)
Lin	e from <i>Schedule A/B</i> : 7.1			100% of fair market value, up to any applicable statutory limit	
	ock 43 e from Schedule A/B: 10.1	\$400.00		\$400.00	Miss. Code Ann. § 85-3-1(a)
				100% of fair market value, up to any applicable statutory limit	
	othing and shoes e from Schedule A/B: 11.1	\$500.00		\$500.00	Miss. Code Ann. § 85-3-1(a)
				100% of fair market value, up to any applicable statutory limit	
	scellaneous jewelry	\$200.00		\$200.00	Miss. Code Ann. § 85-3-1(a)
LIII	e nom ochedale AVD. 1211			100% of fair market value, up to any applicable statutory limit	
Ca	sh e from Schedule A/B: 16.1	\$100.00		\$100.00	Miss. Code Ann. § 85-3-1(a)
				100% of fair market value, up to any applicable statutory limit	
	deral: Future Tax Returns e from Schedule A/B: 28.1	Unknown			Miss. Code Ann. § 85-3-1(j)
LIII	e IIOIII <i>Scriedule PAB.</i> 20.1			100% of fair market value, up to any applicable statutory limit	
	C: Future EIC refunds e from Schedule A/B: 28.2	Unknown		\$0.00	Miss. Code Ann. § 85-3-1(i)
Liii	6 IIGIII 96/160016 772. 20.2			100% of fair market value, up to any applicable statutory limit	
	ture State Refunds e from Schedule A/B: 28.3	Unknown			Miss. Code Ann. § 85-3-1(k)
LIII	e nom <i>schedule AVB.</i> 20.0			100% of fair market value, up to any applicable statutory limit	
	e you claiming a homestead exemption of abject to adjustment on 4/01/22 and every 3			led on or after the date of adjustmer	nt.)
	Yes. Did you acquire the property covered No	ed by the exemption wi	thin 1	,215 days before you filed this case	?
	☐ Yes				

						12/11/19 12:07P
Fill in this inf	ormation	to identify you	r case:			
Debtor 1	Err	nie Donshay I	Miller			
		Name	Middle Name Last Name			
Debtor 2						
(Spouse if, filing)	First	Name	Middle Name Last Name			
United States	Bankrupto	cy Court for the:	SOUTHERN DISTRICT OF MISSISSIPPI			
Case number						
(if known)					☐ Check	if this is an
					amend	ded filing
o =	4.04					
Official Fo	orm 106	<u>5D</u>				
Schedul	e D: 0	Creditors	Who Have Claims Secured	by Propert	У	12/15
is needed, copy number (if know	the Additivn).	onal Page, fill it o	f two married people are filing together, both are eq out, number the entries, and attach it to this form. On			
1. Do any credit	ors have c	laims secured by	your property?			
☐ No. Ch	eck this b	ox and submit th	nis form to the court with your other schedules. Yo	ou have nothing else t	to report on this form.	
Yes. Fi	ill in all of t	the information l	pelow.			
Part 1: Lis	t All Secu	red Claims				
			nore than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim.	If more that	n one creditor has	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 1st Fra	nklin		Describe the property that secures the claim:	\$1,637.00	Unknown	Unknown
Creditor's N	Name		personal property			
200 11:-		•	As of the date you file, the claim is: Check all that			
	ghway 51 and, MS		apply.			
	•	ate & Zip Code	☐ Contingent			
Number, Si	ireet, City, Sta	ate & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the	e debt? Ch	eck one.	Nature of lien. Check all that apply.			
■ Debtor 1 onl			☐ An agreement you made (such as mortgage or sec	ured		
Debtor 2 onl			car loan)			
Debtor 1 and		only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one			☐ Judgment lien from a lawsuit			
☐ Check if thi community	s claim rela		Other (including a right to offset)			
		Opened				
		7/19/19				
Data dalata ::		Last Active	Last 4 digits of account number 2709			
Date debt was	incurred	7/19/19	Last 4 digits of account number 2709			

Debtor 1 Ernie Donshay Miller				Case number (if known)				
First Name	Middle N	ame Last Name		-				
2.2 Jackson Area	Fcu	Describe the property that secures the	e claim:	\$12,002.00	\$8,850.00	\$3,152.00		
Creditor's Name		2012 Acura TSX 93,000 miles						
Pob 1403		As of the date you file, the claim is:	heck all that					
Jackson, MS 3	39205	apply. Contingent						
Number, Street, City, S	State & Zip Code	☐ Unliquidated						
		☐ Disputed						
Who owes the debt?	Check one.	Nature of lien. Check all that apply.						
Debtor 1 only		☐ An agreement you made (such as m car loan)	ortgage or secur	red				
Debtor 2 only								
Debtor 1 and Debtor 2	•	☐ Statutory lien (such as tax lien, mech	nanic's lien)					
☐ At least one of the deb☐ Check if this claim re		Judgment lien from a lawsuit	Non-Purchae	se Money Security				
community debt	elates to a	Other (including a right to offset)	NOII-F UI CIIas	se woney security				
Date debt was incurred	Opened 02/19 Last Active 10/31/19	Last 4 digits of account numb	er 0007					
2.3 OneMain Fina	ncial	Describe the property that secures the	e claim:	\$22,963.00	\$13,880.00	\$9,083.00		
Creditor's Name		2017 Toyota Camry 63,000 m	iles			. ,		
Attac Danieron	1							
Attn: Bankrup Po Box 3251	tcy	As of the date you file, the claim is: C	heck all that					
Evansville, IN	47731	apply. Contingent						
Number, Street, City, S		☐ Unliquidated						
		☐ Disputed						
Who owes the debt?	Check one.	Nature of lien. Check all that apply.						
Debtor 1 only		☐ An agreement you made (such as m	ortgage or secur	red				
Debtor 2 only		car loan)						
Debtor 1 and Debtor 2	-	Statutory lien (such as tax lien, mech	nanic's lien)					
At least one of the deb		☐ Judgment lien from a lawsuit						
Check if this claim re community debt	elates to a	Other (including a right to offset)	Non-Purchas	se Money Security				
	Opened 11/18 Last							
	Active							
Date debt was incurred		Last 4 digits of account number	er 1279					

Debtor 1	Ernie Dons	shay Miller	ame Last Name		Case number (if known)		
	i iist ivailie	Wilddle 14	Last Name				
2.4 O r	neMain Finar	ncial	Describe the property that secures the	claim:	\$8,565.00	\$4,050.00	\$4,515.00
Cree	ditor's Name		2007 Volkswagon Jetta 116,00	0			
			miles				
	tn: Bankrupt	су	As of the date you file, the claim is: Che	ck all that			
	Box 3251	47704	apply.				
	ansville, IN		Contingent				
Nun	nber, Street, City, S	tate & Zip Code	Unliquidated				
Who ow	es the debt? C	heck one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debto	r 1 onlv		☐ An agreement you made (such as mor	rtgage or s	ecured		
☐ Debto	r 2 only		car loan)				
	r 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mecha	nic's lien)			
	st one of the deb		☐ Judgment lien from a lawsuit	,			
☐ Check	k if this claim re nunity debt			on-Purc	hase Money Security		
		Opened					
		03/18 Last					
		Active					
Date deb	t was incurred	9/30/19	Last 4 digits of account number	6651			
2.5 O r	neMain Finar	ncial	Describe the property that secures the	claim:	\$5,000.00	\$3,800.00	\$1,200.00
	ditor's Name		2005 Honda Accord 223,000 m			***	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	tn: Bankrupt	су	As of the date you file, the claim is: Che	ack all that			
	Box 3251		apply.	CK all triat			
Ev	ansville, IN	47731	☐ Contingent				
Nun	nber, Street, City, S	tate & Zip Code	☐ Unliquidated				
Who ow	es the debt? C	haak ana	☐ Disputed Nature of lien. Check all that apply.				
		neck one.	_		d		
Debto			An agreement you made (such as mor car loan)	igage or s	ecurea		
Debto	•						
	r 1 and Debtor 2	•	☐ Statutory lien (such as tax lien, mecha	nic's lien)			
_	st one of the deb		☐ Judgment lien from a lawsuit	D	hana Manay Casynity		
	k if this claim re munity debt	lates to a	Other (including a right to offset)	on-Purc	hase Money Security		
		Opened					
		11/16 Last					
		Active		6651			
Date deb	t was incurred	2/28/18	Last 4 digits of account number	- 0001			
Add the	dollar value of	your entries in C	olumn A on this page. Write that number	here:	\$50,167.00		
	s the last page on the second contract the sec		the dollar value totals from all pages.		\$50,167.00		
Part 2:	List Others to	Be Notified fo	r a Debt That You Already Listed				
trying to than one	collect from you creditor for any	ı for a debt you o	e notified about your bankruptcy for a de we to someone else, list the creditor in F t you listed in Part 1, list the additional cr is page.	Part 1, and	then list the collection agency h	ere. Similarly, if yo	u have more
	ame, Number, Sti neMain Fina	reet, City, State & 2 ncial	zip Code	On wh	nich line in Part 1 did you enter the	creditor? 2.3	
	o Box 1010			Last 4	digits of account number		
	vansville, IN	47706					

Official Form 106D

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Debtor 1	Ernie Donshay Mi	iller		Case number (if known)				
Or Po	me, Number, Street, City, neMain Financial Box 1010 ransville, IN 47706	Middle Name State & Zip Code	Last Name	On which line in Part 1 did you enter the Last 4 digits of account number	e creditor? 2.4			
Or Po	me, Number, Street, City, neMain Financial DBox 1010 ansville, IN 47706	State & Zip Code		On which line in Part 1 did you enter th	ne creditor? _2.5_			

							_	12/11/19 12:07P
Fill in this inf	ormation to identify your	case:						
Debtor 1	Ernie Donshay M	iller						
	First Name	Middle Name		Last Name				
Debtor 2	First Name	NAC-Julia Nilana		Last Name				
(Spouse if, filing)	First Name	Middle Name		Last Name				
United States	Bankruptcy Court for the:	SOUTHERN DIST	RICT OF M	ISSISSIPPI				
Case number								
(if known)								Check if this is an
								amended filing
O#: E	400E/E							
	orm 106E/F							4644
	e E/F: Creditors W and accurate as possible. Us							12/15
Schedule G: Exe Schedule D: Cre left. Attach the (ontracts or unexpired leases ecutory Contracts and Unexp editors Who Have Claims Sec Continuation Page to this pag number (if known).	ired Leases (Official I ured by Property. If m	Form 106G). iore space is	Do not include needed, copy	any credito the Part you	rs with partially a need, fill it out,	secured clain number the e	ns that are listed in entries in the boxes on the
Part 1: Lis	t All of Your PRIORITY Un	secured Claims						
1. Do any cre	ditors have priority unsecure	d claims against you?	?					
No. Go	to Part 2.							
☐ Yes.								
Part 2: Lis	t All of Your NONPRIORIT							
☐ No. You ☐ Yes. 4. List all of y unsecured of	have nothing to report in this p rour nonpriority unsecured cl claim, list the creditor separatel editor holds a particular claim, i	art. Submit this form to aims in the alphabetic y for each claim. For ea	the court with	he creditor who	holds each	it is. Do not list o	laims already i	ncluded in Part 1. If more
4.1 Capit	tal One	Last 4	digits of ac	count number	6563			\$448.00
Nonpri Attn: Po B	ority Creditor's Name Bankruptcy ox 30285	 '	was the deb			d 2/12/14 La	st Active	
Salt I	Lake City, UT 84130 er Street City State Zip Code	As of	the date you	file, the claim i	i s: Chack all	that apply		
	ncurred the debt? Check one.	A3 01	ine date you	inc, the claim	J. Check all	шаг арргу		
_	otor 1 only	Пс	ntingent					
_	otor 2 only		lliquidated					
	otor 2 only otor 1 and Debtor 2 only		sputed					
_	east one of the debtors and an	_	•	RITY unsecured	d claim:			
	east one of the debtors and and eck if this claim is for a comi		udent loans		*			
⊔ Ch debt	eck if this claim is for a comi	nunity		ng out of a sena	ration agree	ment or divorce t	hat you did not	•
Is the	claim subject to offset?		as priority cla		agrob		, 50 010 1101	-
■ No		☐ De	bts to pension	n or profit-sharin	g plans, and	d other similar deb	ots	
☐ Yes	3	■ Ot	her, Specify	Credit Card	I			
		<i>→</i> 0t	cr. opcony					

Jeptoi	1 Ernie Donshay Miller		Case number (if known)	
1.2	Genesis Bc/Celtic Bank	Last 4 digits of account number	3260	\$426.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 4477 Beaverton, OR 97076	When was the debt incurred?	Opened 08/19 Last Active 11/21/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	og plans, and other similar debts	
	☐ Yes	Other Specify Credit Card		
.3	Jackson Area Fcu	Last 4 digits of account number	0006	\$1,612.00
	Nonpriority Creditor's Name Pob 1403 Jackson, MS 39205	When was the debt incurred?	Opened 02/19 Last Active 10/31/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Unsecured		
4	Navient	Last 4 digits of account number	0228	\$20,347.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9640 Wilken Borre BA 18773	When was the debt incurred?	Opened 11/06 Last Active 10/31/19	
	Wilkes-Barre, PA 18773 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		

Debto	r 1 Ernie Donshay Miller	Case number (if known)					
4.5	Navient Nonpriority Creditor's Name	Last 4 digits of account number	0228	\$15,396.00			
	Attn: Bankruptcy Po Box 9640 Wilkes-Barre, PA 18773	When was the debt incurred?	Opened 11/06 Last Active 10/31/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans	d claim:				
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other. Specify					
		Educationa	l				
4.6	Navient Nonpriority Creditor's Name	Last 4 digits of account number	0228	\$1,895.00			
	Attn: Bankruptcy Po Box 9640	When was the debt incurred?	Opened 11/06 Last Active 10/31/19				
	Wilkes-Barre, PA 18773 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify					
		Educationa	l <u> </u>				
4.7	Nelnet	Last 4 digits of account number	9709	\$13,948.00			
	Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505	When was the debt incurred?	Opened 02/08 Last Active 10/31/19				
	Lincoln, NE 68501 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other. Specify					
		Educationa	l				

Debtor	1 Ernie Donshay Miller	Case number (if known)				
4.8	NeInet Nonpriority Creditor's Name	Last 4 digits of account number	9509	\$7,701.00		
	Attn: Bankruptcy Claims Po Box 82505 Lincoln, NE 68501	When was the debt incurred?	Opened 02/08 Last Active 10/31/19			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	_				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed	d alaim.			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify				
		Educationa	ll			
4.9	Nelnet	Last 4 digits of account number	9609	\$2,369.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Claims Po Box 82505	When was the debt incurred?	Opened 04/08 Last Active 10/31/19			
	Lincoln, NE 68501 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify				
		Educationa	1			
4.1	Smith Rouchon & Associates	Last 4 digits of account number	5607	\$55.00		
	Nonpriority Creditor's Name Sra	When was the debt incurred?	Opened 6/28/19			
	1456 Ellis Ave					
	Jackson, MS 39204 Number Street City State Zip Code	- As of the data you file the claim	in Charle all that apply			
	Who incurred the debt? Check one.	As of the date you file, the claim i	s. Спеск ан тат арргу			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	\square Debts to pension or profit-sharing	g plans, and other similar debts			
	□Yes	■ Other. Specify Lakeland R	adiologists Pa			

1 Ernie Donshay Miller		Case number (if known)				
U.S. Department of Education	Last 4 digits of account number	2927	\$31,465.00			
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408	When was the debt incurred?	Opened 09/12 Last Active 10/08/17				
Saint Paul, MN 55116 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
■ Debtor 1 only	☐ Contingent					
☐ Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:				
At least one of the debtors and another	Student loans					
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts				
□ Yes	Other. Specify	g p				
165	Educationa					
U.S. Department of Education	Last 4 digits of account number	2934	\$26,941.00			
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 01/14 Last Active 10/08/17				
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply				
Who incurred the debt? Check one.	☐ Contingent					
Debtor 1 only	☐ Unliquidated					
Debtor 2 only	☐ Disputed					
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	•	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharin	ng plans, and other similar debts				
☐ Yes	☐ Other. Specify					
	Educationa	ıl				
U.S. Department of Education	Last 4 digits of account number	2942	\$20,818.0			
Nonpriority Creditor's Name Ecmc/Bankruptcy Po Box 16408 Saint Paul, MN 55116	When was the debt incurred?	Opened 09/10 Last Active 10/08/17				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
■ Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	Student loans					
☐ Check if this claim is for a community debt	Obligations arising out of a sepa	aration agreement or divorce that you did not				
	☐ Obligations arising out of a sepa report as priority claims ☐ Debts to pension or profit-sharin	· ·				

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debt

No ☐ Yes ☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

Educational

Student loans

☐ Other. Specify

report as priority claims

At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

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Saint Paul, MN 55116 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

☐ Other. Specify

When was the debt incurred?

Opened 10/15 Last Active

10/08/17

Debts to pension or profit-sharing plans, and other similar debts

Educational

■ No
□ Yes

Ecmc/Bankruptcy

Po Box 16408

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On which entry in Part 1 or Part 2 did you list the original creditor?

Last 4 digits of account number

Nelnet Po Box 82561

Name and Address

Name and Address

Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Lincoln, NE 68501 Last 4 digits of account number Part 2: Creditors with Nonpriority Unsecured Claims

On which entry in Part 1 or Part 2 did you list the original creditor?

Schedule E/F: Creditors Who Have Unsecured Claims Official Form 106 E/F

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12/11/19 12:07PM Case number (if known) Debtor 1 Ernie Donshay Miller Nelnet Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 82561 ■ Part 2: Creditors with Nonpriority Unsecured Claims Lincoln, NE 68501 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Smith Rouchon & Associates** Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1456 Ellis Ave Part 2: Creditors with Nonpriority Unsecured Claims Jackson, MS 39204 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **U.S.** Department of Education Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 5609 Part 2: Creditors with Nonpriority Unsecured Claims Greenville, TX 75403 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? U.S. Department of Education Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 5609 ■ Part 2: Creditors with Nonpriority Unsecured Claims Greenville, TX 75403 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? U.S. Department of Education Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 5609 ■ Part 2: Creditors with Nonpriority Unsecured Claims Greenville, TX 75403 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? U.S. Department of Education Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 5609 Part 2: Creditors with Nonpriority Unsecured Claims Greenville, TX 75403 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? U.S. Department of Education Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 5609 ■ Part 2: Creditors with Nonpriority Unsecured Claims Greenville, TX 75403 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? U.S. Department of Education Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 5609 ■ Part 2: Creditors with Nonpriority Unsecured Claims Greenville, TX 75403 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **U.S. Department of Education** Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 5609 Part 2: Creditors with Nonpriority Unsecured Claims Greenville, TX 75403 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address U.S. Department of Education Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 5609 Part 2: Creditors with Nonpriority Unsecured Claims Greenville, TX 75403 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address U.S. Department of Education Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 5609 Part 2: Creditors with Nonpriority Unsecured Claims Greenville, TX 75403 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address U.S. Department of Education Line 4.20 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Po Box 5609 Part 2: Creditors with Nonpriority Unsecured Claims Greenville, TX 75403 Last 4 digits of account number

Debtor 1 Ernie Donshay Miller		Case number (if known)	12/11/19 12:07PM
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?	
US Attorney	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
for Dept of Ed 501 E Court, Ste 4.430 Jackson, MS 39201		Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?	
US Attorney	Line 4.4 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
for Navient 501 E Court, Ste 4.430 Jackson, MS 39201		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims	Ch	Towns and anticipathon debte one and the management	C.L.	
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 209,856.00
claims from Part 2	6a.	Obligations arising out of a congretion agreement or diverse that		
IIOIII Fait 2	og.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 2,541.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 212,397.00

Fill in this inform	nation to identify your				
Debtor 1	Ernie Donshay M	iller			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	_	
United States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case number					
(if known)					Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1			·		
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4	•				
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	_ · · ,		3.000		
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

					12/11/19 12:07PI
Fill in this	information to identify your	case:			
Debtor 1	Ernie Donshay M	iller			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name		
	<i>o,</i>	SOUTHERN DISTRICT			
United Sta	tes Bankruptcy Court for the:	300 THERN DISTRICT	OF WIGGIGGIFFI		
Case numl	ber				☐ Check if this is an
()					amended filing
044	. =				-
	I Form 106H				
<u>Sched</u>	lule H: Your Cod	ebtors			12/15
No Yes 2. With Arizon No. Yes 3. In Colin line Form	hin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. S. Did your spouse, former spoumn 1, list all of your codeb 2 again as a codebtor only	u lived in a community property, Nevada, New Mexico, Publics, or legal equivalent live tors. Do not include your if that person is a guaran	operty state or territo erto Rico, Texas, Wash with you at the time? spouse as a codebto tor or cosigner. Make	ry? (Community property iington, and Wisconsin.) r if your spouse is filing sure you have listed th	w states and territories include I with you. List the person shown the creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cree Check all schedules	ditor to whom you owe the debt s that apply:
21				□ Schodulo D. line	
3.1	Name			☐ Schedule D, line☐ Schedule E/F, li	
				☐ Schedule G, line	
-	Number Street				
	City	State	ZIP Code		
				_	
3.2	Name			Schedule D, line	
				☐ Schedule E/F, line ☐ Schedule G, line	
-	Number Street				
	City	State	ZIP Code		

Fill	in this information to identify your	case:		
Deb	otor 1 Ernie Dons	shay Miller	_	
	otor 2 use, if filing)			
Unit	ted States Bankruptcy Court for th	e: SOUTHERN DISTRIC	CT OF MISSISSIPPI	
	se number lown)		-	Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
\bigcirc	fficial Form 1061			13 income as of the following date:
_	fficial Form 106l			MM / DD/ YYYY
	chedule I: Your Inc		unio ara filina tamathar (Dahtar 1	12/15 and Debtor 2), both are equally responsible for
spoi	use. If you are separated and you che a separate sheet to this form	our spouse is not filing w . On the top of any additi	ith you, do not include informatio	ng with you, include information about your on about your spouse. If more space is needed, case number (if known). Answer every question.
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	F	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Teacher/Math Coach	
	Include part-time, seasonal, or self-employed work.	Employer's name	McComb Public Schools	DFA - Finance and Administration
	Occupation may include student or homemaker, if it applies.	Employer's address	695 Minnesota Ave McComb, MS 39648	State of MS
		How long employed t	here? 2 years	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

filing spouse	non-			
2,497.86	\$	4,684.28	\$	2.
0.00	+\$	0.00	+\$	3.
2,497.86	\$	4,684.28	\$	4.

For Debtor 2 or

For Debtor 1

Debt	or 1	Ernie Donshay Miller	_	Case	number (if known)			
				For	Debtor 1	For D	ebtor 2 or	
				. 0.	Dobto		iling spouse	
	Cop	y line 4 here	4.	\$	4,684.28	\$	2,497.86	-
_	Lict	all payroll deductions:						
5.			5 -	œ	225 52	ф.	055.00	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$_ \$	625.53	\$	355.90	_
	5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5c.	- \$ -	421.59	\$	224.81	_
	5d.	Required repayments of retirement fund loans	5d.	\$ -	0.00	\$ 	0.00 0.00	_
	5e.	Insurance	5e.	\$ -	175.66	\$ 	69.40	_
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00	_
	5g.	Union dues	5g.	\$-	0.00	\$	0.00	_
	5h.	Other deductions. Specify:	5h.+	· · · · ·		+ \$	0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,222.78	\$	650.11	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,461.50	\$	1,847.75	_
8.		all other income regularly received:		· -	<u> </u>	·	.,	-
0.	8a.	Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive		· <u> </u>		·		=
		Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$_	0.00	\$	0.00	_
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	0.00	_
	8e.	Social Security	8e.	\$	0.00	\$	0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	_ 8g.	\$-	0.00	\$	0.00	_
	8h.	Other monthly income. Specify:	8h	· -		+ \$	0.00	_
				Ė		_		-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.0	0
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$		3,461.50 + \$	1,84	7.75 = \$	5,309.25
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	Inclu othe	e all other regular contributions to the expenses that you list in <i>Schedule</i> ide contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	deper		•		hedule J. 11. +\$	0.00
	Spo	··········					Ψ	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					12. \$	5,309.25
							Combi	
12	Do 1	ou expect an increase or decrease within the year after you file this form	?				monthl	ly income
10.		No.						
		Yes. Explain:						
	_							

Fill	in this informa	ation to identify yo	our case:			1		
Deb	otor 1	Ernie Donsh	ay Miller			Check	c if this is:	
	otor 2 ouse, if filing)						An amended filing A supplement show I 3 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bank	ruptcy Court for the	: SOUTH	IERN DISTRICT OF MISS	ISSIPPI	<u> </u>	MM / DD / YYYY	
	se number nown)							
0	fficial Fo	orm 106J				-		
		J: Your						12/1
info	ormation. If m		eded, atta	. If two married people ar ich another sheet to this n.				
Par	t 1: Desci	ribe Your House	hold					
١.	No. Go to							
		es Debtor 2 live	in a separ	ate household?				
		-	st file Offic	al Form 106J-2, <i>Expenses</i>	s for Separate House	ehold of Debto	or 2.	
2.	Do you hav	e dependents?	□ No	,	,			
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state				h		40	□ No
	dependents	names.			boy		16	■ Yes □ No
					girl		16	■ Yes
					boy		20	□ No
					БОУ			■ Yes □ No
2	De veur ev	nanaaa inaluda						☐ Yes
3.	expenses o	penses include of people other t d your depende	han _	No Yes				
Est	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
	olicable date.		Dankrupio	y is ilied. Il tilis is a supp	nemental Schedule	e J, Check the	e box at the top of	i the form and thi in the
the	value of suc	h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your expe	enses
(01	ficial Form 10	JOI. <i>)</i>						
4.		or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgag	e 4. \$		675.00
	If not include	ded in line 4:						
		estate taxes				4a. \$		0.00
		erty, homeowner's e maintenance, re		's insurance .pkeep expenses		4b. \$ 4c. \$		29.00 100.00
	4d. Home	eowner's associat	tion or con	dominium dues		4d. \$		0.00
5.	Additional i	mortgage payme	ents for ye	our residence, such as ho	me equity loans	5. \$		0.00

Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify:	6b.	\$ 	230.00
Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services	6b.	·	
Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services	6b.	·	
	6.		80.00
Other. Specify:	6c.	\$	500.00
	6d.	\$	0.00
and housekeeping supplies	7. :	\$	1,100.00
are and children's education costs	8.	\$	0.00
ng, laundry, and dry cleaning		\$	150.00
nal care products and services		\$	150.00
			75.00
•			
•	12.	\$	500.00
ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
able contributions and religious donations	14.	\$	560.00
nce.			
include insurance deducted from your pay or included in lines 4 or 20.			
Life insurance		·	0.00
Health insurance	15b.	\$	0.00
Vehicle insurance	15c.	\$	263.00
Other insurance. Specify:	15d.	\$	0.00
	16.	\$	0.00
· ·		·	0.00
• •			0.00
	17c.	\$	0.00
		\$	0.00
		Φ.	0.00
		—	0.00
			0.00
			0.00
		·	
		·	0.00
			0.00
		·	0.00
Specify: Estimated future car payment	21	+\$	300.00
ate your monthly expenses			
		\$	4,862.00
<u> </u>		\$	
		¢	4,862.00
ad line 22a and 22b. The result is your monthly expenses.		Ψ	4,862.00
ate your monthly net income.			
Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,309.25
Copy your monthly expenses from line 22c above.	23b.	-\$	4,862.00
	Г		
		Φ.	447.25
The result is your <i>monthly net income</i> .	23c.	Φ	447.25
a compact on increase or decrease in viscon account to the contract of the	van fila 45!- 1		
			or decrease because of a
rriple, do you expect to finish paying for your car loan within the year of do you expect yo ation to the terms of your mortgage?	a mongage pa	ayment to increase	n deciease because of a
and the terms of your mongage.			
	ted from your pay on line 5, Schedule I, Your Income (Official Form 106I) payments you make to support others who do not live with you. y: real property expenses not included in lines 4 or 5 of this form or on School Mortgages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues Specify: Estimated future car payment ate your monthly expenses dd lines 4 through 21. opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 dd line 22a and 22b. The result is your monthly expenses. late your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above. Subtract your monthly expenses from your monthly income. The result is your monthly net income. u expect an increase or decrease in your expenses within the year after your monte, do you expect your monte, do you expect your monte, do you expect to finish paying for your car loan within the year or do you expect your monte, do you expect to finish paying for your car loan within the year or do you expect your monte, and the your expenses within the year or do you expect your monte, do you expect you	portation. Include gas, maintenance, bus or train fare. include car payments. include car payments. include car payments. include car payments. include insurance deducted from your pay or included in lines 4 or 20. Include insurance deducted from your pay or included in lines 4 or 20. Include insurance include insurance included in lines 4 or 20. Included in surance included in lines 4 or 20. Included in surance included in lines 4 or 20. Included in surance included in lines 4 or 20. Included in surance included in lines 4 or 20. Included in lines 4 or 20. Included in lines 4 or 20. Included in lines 5 or included in lines 6 or 20. Included in lines 6 or 20. Included in lines 7 or 20. Included in lines 8 or 20. Included in lines 8 or 20. Included in lines 9 or 20. Included 9	include gas, maintenance, bus or train fare. include car payments. include insurance deducted from your pay or included in lines 4 or 20. include insurance deducted from your pay or included in lines 4 or 20. it is insurance include insurance include insurance include insurance include insurance. Include insurance include insurance include insurance. Include insurance include insurance. Include insurance include insurance. Include insurance included in lines 4 or 20. Include insurance include insurance included in lines 4 or 20. Include insurance included in lines 4 or 20. Include insurance included insurance included in lines included insurance included ins

FIII III UIIS IIIIOIII	nation to identity your	case.			
Debtor 1	Ernie Donshay M	iller			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case number					
(if known)				☐ Check if this is a	n
				amended filing	
			Debtor's Sche		12/15
obtaining money		n connection with a bank		king a false statement, concealing property les up to \$250,000, or imprisonment for up	
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an attor	ney to help you fill out bankr	ruptcy forms?	
■ No					

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Ernie Donshay Miller
Ernie Donshay Miller
Signature of Debtor 1

Signature of Debtor 2

Date December 11, 2019

Yes. Name of person

Date

Official Form 106Dec

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

EilLi e	thic informa	tion to identify your				
		tion to identify your				
Debto	r 1	Ernie Donshay N First Name	Middle Name	Last Name		
Debto						
(Spouse	if, filing)	First Name	Middle Name	Last Name		
United	States Bank	ruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case ı	number					
(if knowr	n)				_	Check if this is an mended filing
Offic	cial Forr	n 107				
			Affairs for Indivi	duals Filing for B	ankruptcy	4/19
inform	ation. If mor er (if known).	e space is needed, Answer every ques	attach a separate sheet to	are filing together, both are this form. On the top of an		
		urrent marital statu		a Livea Belole		
_	Married Not marrie	.d				
	i Not mame	eu .				
2. Di	uring the last	3 years, have you	lived anywhere other than	where you live now?		
	l No					
	Yes. List a	II of the places you li	ved in the last 3 years. Do r	not include where you live nov	<i>I</i> .	
D	ebtor 1 Prior	r Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
				egal equivalent in a commun evada, New Mexico, Puerto R		
	l _{No}					
		sure you fill out Sch	nedule H: Your Codebtors (C	Official Form 106H).		
5 40						
Part 2	Explain	the Sources of You	r Income			
		mount of income you	u received from all jobs and	ng a business during this ye all businesses, including part ve together, list it only once ur	-time activities.	ndar years?
Fi	you are filing					
Fi						
Fi lf :	l No	the details.				
Fi lf :	l No	the details.	Debtor 1		Debtor 2	
Fi lf :	l No	the details.	Debtor 1	Gross income	Debtor 2	Gross income
Fi lf :	l No	the details.	Debtor 1 Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Debtor 2 Sources of income Check all that apply.	Gross income (before deductions and exclusions)
Fi If	I No Yes. Fill in	the details. current year until for bankruptcy:	Sources of income	(before deductions and	Sources of income	(before deductions

Official Form 107

De	ebtor 1	Ernie De	onshay Miller				Cas	se number (if known)		
				Debtor 1				Debtor 2		
				Sources	of income I that apply.		s income re deductions and sions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		alendar ye 1 to Decer	ear: nber 31, 2018)	■ Wage bonuses	es, commissions, , tips		\$74,019.00	☐ Wages, com bonuses, tips	missions,	
				☐ Opera	ating a business			☐ Operating a	business	
5.	Include and oth winning List ea	e income r her public gs. If you a	egardless of who benefit payment are filing a joint o and the gross in	ether that incomes; pensions; ase and you	ome is taxable. Ex- rental income; inte have income that	amples of rest; divic you recei	is calendar years? f other income are a lends; money collect ved together, list it of not include income to	alimony; child supp cted from lawsuits; only once under De	royalties; an ebtor 1.	ecurity, unemployment, d gambling and lottery
				Debtor 1				Debtor 2		
				Sources Describe	of income below.	each	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3:	List Certa	in Payments Yo	ou Made Bef	ore You Filed for	Bankrup	tcy			
6.	_	lo. Neith indivi	ner Debtor 1 not dual primarily for g the 90 days be No. Go to line Yes List below	Debtor 2 har a personal, efore you filed 7.	family, or househod for bankruptcy, do or to whom you pa	umer dek old purpos id you pa id a total	ots. Consumer debi ie." y any creditor a tota of \$6,825* or more	al of \$6,825* or mo	re? rments and t	1(8) as "incurred by an
		* Su	not includ	le payments	to an attorney for t	his bankr				nd alimony. Also, do
	■ Y				ve primarily consund for bankruptcy, d		ots. y any creditor a tota	al of \$600 or more?		
		= 1	No. Go to line	7.						
			include p		domestic support o		of \$600 or more and s, such as child sup			t creditor. Do not nclude payments to an
	Credi	itor's Nam	e and Address		Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	payment for
7.	Insider of whice a busing alimon	<i>r</i> s include y ch you are ness you c	your relatives; ar an officer, direct	ny general pa or, person in	artners; relatives of control, or owner	any gene of 20% or		erships of which you g securities; and ar	u are a gene ny managing	ral partner; corporations agent, including one for
	□ Y	'es. List all	payments to an	insider.						
	Inside	er's Name	and Address		Dates of payme	ent	Total amount paid	Amount you still owe	Reason fo	r this payment

De	btor 1 Ernie Donshay Miller		Cas	e number (if known)		
8.	Within 1 year before you filed for bankrupt	cy, did you make any payı	ments or transfer a	ny property on a	ccount of a de	ebt that benefited an
	insider? Include payments on debts guaranteed or cos	signed by an insider.				
	■ No					
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount	Amount you		this payment
			paid	still owe	Include cred	tor's name
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupte. List all such matters, including personal injury modifications, and contract disputes.					
	■ No					
	Yes. Fill in the details. Case title	Nature of the case	Court or agoney		Status of the	0.0250
	Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below		rty repossessed, fo	oreclosed, garnis	shed, attached	, seized, or levied?
	No. Go to line 11.					
	☐ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened				1 11 9
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec		uding a bank or fin	nancial institutior	ı, set off any a	mounts from your
	NoYes. Fill in the details.					
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		rty in the possessi	on of an assigne	e for the bene	fit of creditors, a
	No					
	☐ Yes					
Pa	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup	tcy, did you give any gifts	with a total value	of more than \$60	0 per person?	•
	No					
	Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts		Date:	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankrup	etcv. did vou give any gifts	or contributions v	vith a total value	of more than	\$600 to any charity?
	■ No					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	☐ Yes. Fill in the details for each gift or con	tribution.				
	Gifts or contributions to charities that tot more than \$600 Charity's Name	al Describe what you	contributed		s you ibuted	Value
	Address (Number, Street, City, State and ZIP Code)					
Pa	rt 6: List Certain Losses					

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Best Case Bankruptcy

19-04390-NPO Dkt 3 Filed 12/11/19 Entered 12/11/19 12:09:04 Page 35 of 57 12/11/19 12:07PM Debtor 1 Case number (if known) Ernie Donshay Miller or gambling? Nο Yes. Fill in the details. Describe any insurance coverage for the loss Date of your Describe the property you lost and Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You McRaney & McRaney \$390 attorney fees; \$25 credit report; \$750.00 Attorneys at Law and \$310 filing fee 503 Springridge Rd Clinton, MS 39056 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Amount of Date payment Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

Nο

Yes. Fill in the details.

Person Who Received Transfer Description and value of Date transfer was Describe any property or **Address** property transferred payments received or debts made paid in exchange Person's relationship to you

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

Yes. Fill in the details.

Name of trust Description and value of the property transferred **Date Transfer was** made

Debtor 1 Ernie Donshay Miller

Case number (if known)

Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and Sto	orage Unit	s				
20.	Within 1 year before you filed for bankrupto; sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, associated No	or other financial accou	nts; certificates	of deposit					
	Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account or account number instrument		nt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?			
22.	Have you stored property in a storage unit of	or place other than your	home within 1	year befor	e you filed for bankrup	tcy?			
	■ No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)								
Par	t 9: Identify Property You Hold or Control	for Someone Else							
23.	Do you hold or control any property that so for someone.	meone else owns? Incl	ude any propert	y you borr	owed from, are storing	for, or hold in trust			
	■ No								
	Yes. Fill in the details.								
	Owner's Name		Where is the property? (Number, Street, City, State and ZIP		the property	Value			
	Address (Number, Street, City, State and ZIP Code)	Code)							
Par	t 10: Give Details About Environmental Info	ormation							
For	the purpose of Part 10, the following definition	ons apply:							
	Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of these	ne air, land, soil, surfac	e water, ground						
	Site means any location, facility, or property to own, operate, or utilize it, including dispose		environmental la	aw, wheth	er you now own, opera	te, or utilize it or used			
	Hazardous material means anything an envi hazardous material, pollutant, contaminant,		as a hazardous	waste, ha	zardous substance, tox	ic substance,			
Rep	ort all notices, releases, and proceedings that	at you know about, rega	ardless of when	they occu	rred.				
24.	Has any governmental unit notified you that	you may be liable or pe	otentially liable (under or i	n violation of an enviro	nmental law?			
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it								

Deb	otor 1	Ernie Donshay Miller		Cas	e number (if known)	
25.	Have	you notified any governmental unit of	fany release of hazardous material?			
		No Yes. Fill in the details.				
		ne of Site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice
26.	Have	you been a party in any judicial or ad	ministrative proceeding under any envir	ronn	nental law? Include settlements a	nd orders.
	_	No Yes. Fill in the details.				
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case
Par	t 11:	Give Details About Your Business or	Connections to Any Business			
27.	Withi	n 4 years before you filed for bankrup	tcy, did you own a business or have an	y of	the following connections to any	business?
	1	☐ A sole proprietor or self-employed	in a trade, profession, or other activity,	eithe	er full-time or part-time	
	I	☐ A member of a limited liability com	pany (LLC) or limited liability partnershi	ip (Ll	LP)	
		☐ A partner in a partnership				
	1	An officer, director, or managing ex	ecutive of a corporation			
		An owner of at least 5% of the votir	ng or equity securities of a corporation			
		No. None of the above applies. Go to	Part 12.			
		Yes. Check all that apply above and fil	I in the details below for each business			
	Busi	iness Name	Describe the nature of the business		Employer Identification number Do not include Social Security r	
		ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	idilibei ol IIII4.
28.		n 2 years before you filed for bankrup utions, creditors, or other parties.	tcy, did you give a financial statement to	o an	yone about your business? Inclu	de all financial
		No				
		Yes. Fill in the details below.				
	Nam Add		Date Issued			
	•	ber, Street, City, State and ZIP Code)				
Par	t 12:	Sign Below				
are t	true a	nd correct. I understand that making a	nancial Affairs and any attachments, an false statement, concealing property, c \$250,000, or imprisonment for up to 20	or ob	taining money or property by fra	
/s/	Ernie	Donshay Miller	_			
		onshay Miller e of Debtor 1	Signature of Debtor 2			
Dat	e D	ecember 11, 2019	Date			
Did∶ ■ N □ Y	lo	ttach additional pages to Your Statem	ent of Financial Affairs for Individuals F	iling	for Bankruptcy (Official Form 10	7)?
Did :	-	ay or agree to pay someone who is no	t an attorney to help you fill out bankru	ptcy	forms?	
ПΥ			uptcy Petition Preparer's Notice, Declaration		,	page 6
J.11101	i Oili	Julion States				page v

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			12/11/19 12:07PM
Debtor 1	Ernie Donshay Miller	Case number (if known)	

Fill in this inform	mation to identify your	case:		
Debtor 1	Ernie Donshay Mi	ller		
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DIS	TRICT OF MISSISSIPPI	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo				
<u>Statemer</u>	nt of Intentio	<u>n for Indiv</u>	<u>riduals Filing Under Chap</u>	ter 7 12/15
If you are an indi	ividual filing under chap	oter 7 vou must fil	Lout this form if:	
	e claims secured by you		rout this form ii.	
_	sed personal property a		ot expired.	
			you file your bankruptcy petition or by the date e time for cause. You must also send copies to	
on the		e court exterius tri	e time for cause. For must also send copies to	the orealtors and lessors you list
		in a joint case, bo	th are equally responsible for supplying correc	t information. Both debtors must
sign ar	nd date the form.			
	and accurate as possib our name and case nun		s needed, attach a separate sheet to this form. (On the top of any additional pages,
	our name and case num	iber (ii kilowii).		
Part 1: List Yo	our Creditors Who Have	Secured Claims		
1. For any credit	-	rt 1 of Schedule D	: Creditors Who Have Claims Secured by Prope	erty (Official Form 106D), fill in the
	editor and the property the	nat is collateral	What do you intend to do with the property the	
			secures a debt?	as exempt on Schedule C?
Our d'unite			_	_
Creditor's C	DneMain Financial		Surrender the property.	□ No
			☐ Retain the property and redeem it.☐ Retain the property and enter into a	■ Yes
	2017 Toyota Camry	/ 63,000 miles	Reaffirmation Agreement.	
property securing debt:			☐ Retain the property and [explain]:	
Creditor's C	DneMain Financial			□No
name:	/Heiviaili i illalicial		Surrender the property.Retain the property and redeem it.	□ INU
			☐ Retain the property and enter into a	■ Yes
Description of property	2007 Volkswagon miles	Jetta 116,000	Reaffirmation Agreement.	
securing debt:			☐ Retain the property and [explain]:	

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Debtor 1 Ernie Donshay Miller	Case number (if known)
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention a	about any property of my estate that secures a debt and any personal
property that is subject to an unexpired lease.	
X /s/ Ernie Donshay Miller	X
Ernie Donshay Miller Signature of Debtor 1	Signature of Debtor 2
Date December 11, 2019	Date

Ħ	ll in this inforn	mation to identify your case:			eck one box only as d	irected in t	his form and	in Form
De	ebtor 1	Ernie Donshay Miller			2A-1Supp:			
1 .	ebtor 2 bouse, if filing)				☐ 1. There is no pres	umption of	abuse	
	nited States E	Bankruptcy Court for the: Southern District	of Missis	ssippi	 2. The calculation tapplies will be named Calculation (Off 	nade unde	r Chapter 7 N	
	known)				☐ 3. The Means Test qualified military			
					☐ Check if this is a	n amende	ed filing	
O	fficial Fo	orm 122A - 1						
C	hapter	7 Statement of Your Cu	rrent	Monthly Inc	ome			12/19
atta cas qua	ach a separate se number (if k alifying militar	and accurate as possible. If two married people e sheet to this form. Include the line number to known). If you believe that you are exempted fr y service, complete and file Statement of Exen Iculate Your Current Monthly Income	which the	e additional information a sumption of abuse becau	applies. On the top of a use you do not have prir	ny addition	al pages, write umer debts or	your name and because of
1	. What is ye	our marital and filing status? Check one of	only.					
	☐ Not ma	arried. Fill out Column A, lines 2-11.						
	☐ Marrie	d and your spouse is filing with you. Fill o	out both (Columns A and B, lines	2-11.			
	_	d and your spouse is NOT filing with you						
	Livir	ng in the same household and are not leg	nally sen	arated Fill out both Co	Jumns A and B lines	D_11		
	☐ Livir pen	ng separately or are legally separated. Fil alty of perjury that you and your spouse are g apart for reasons that do not include evac	l out Colu legally s	umn A, lines 2-11; do no eparated under nonban	ot fill out Column B. By	checking es or that y		
	101(10A). For the 6 months,	rage monthly income that you received from a example, if you are filing on September 15, the 6- add the income for all 6 months and divide the tot he same rental property, put the income from that	month per al by 6. Fil	riod would be March 1 through the result. Do not include the result.	ugh August 31. If the amode any income amount m	ount of your ore than one	monthly income ce. For example	e varied during e, if both
					Column A Debtor 1	Column Debtor 2 non-filir		
2	2. Your gros	ss wages, salary, tips, bonuses, overtime ductions).	, and co	mmissions (before all	\$ 4,684.28	\$	2,497.86	
3		and maintenance payments. Do not includ is filled in.	e payme	nts from a spouse if	\$	\$	0.00	
4	of you or from an ur and roomr	nts from any source which are regularly pyour dependents, including child support married partner, members of your househo mates. Include regular contributions from a solution on the contribution on the contribution on the contribution of the con	r t. Include ld, your o	e regular contributions dependents, parents,	\$0.00	\$	0.00	
5	. Net incom	ne from operating a business, profession	, or farm					
	_		œ.	Debtor 1 0.00				
1	Cross roo	ointe (hoforo all doductions)	\$	v.uu				

0.00

0.00

\$

-\$

Debtor 1 0.00

0.00 Copy here -> \$

0.00 Copy here -> \$

0.00

0.00

0.00

Gross receipts (before all deductions)

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

Ordinary and necessary operating expenses

6. Net income from rental and other real property

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

Net monthly income from a business, profession, or farm \$

0.00

0.00

0.00

Debto	Ernie Donshay Miller			Case numbe	r (<i>if known</i>)				
				Column A Debtor 1		Deb	umn B otor 2 or -filing s		
8.	Unemployment compensation			\$	0.00	\$		0.00	
	Do not enter the amount if you contend that the amount receive the Social Security Act. Instead, list it here:		er						
	For you \$	0.00							
	For your spouse \$	0.00							
9.	Pension or retirement income. Do not include any amount recipenefit under the Social Security Act. Also, except as stated in the not include any compensation, pension, pay, annuity, or alloward United States Government in connection with a disability, combidisability, or death of a member of the uniformed services. If you pay paid under chapter 61 of title 10, then include that pay only does not exceed the amount of retired pay to which you would of retired under any provision of title 10 other than chapter 61 of	the next sentence, do not paid by the at-related injury or u received any retire to the extent that it otherwise be entitled	ed	\$	0.00	\$		0.00	
10.	Income from all other sources not listed above. Specify the Do not include any benefits received under the Social Security received as a victim of a war crime, a crime against humanity, of domestic terrorism; or compensation, pension, pay, annuity, or United States Government in connection with a disability, combidisability, or death of a member of the uniformed services. If necessaries on a separate page and put the total below.	Act; payments or international or allowance paid by th at-related injury or		\$	0.00	\$		0.00	
				\$	0.00	\$		0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$		0.00	
11.	Calculate your total current monthly income. Add lines 2 threeach column. Then add the total for Column A to the total for Co		4	1,684.28	+ \$	2,49	7.86	Total incom	7,182.14
12.	Calculate your current monthly income for the year. Follow 12a. Copy your total current monthly income from line 11	these steps:		Сор	y line 11	nere=:	>	\$	7,182.14
	Multiply by 12 (the number of months in a year)							X	12
									86,185.68
	12b. The result is your annual income for this part of the form						12b.	\$	00,105.00
13.	Calculate the median family income that applies to you. Fol	low these steps:							
	Fill in the state in which you live.	MS							
	Fill in the number of people in your household.	5							
	Fill in the median family income for your state and size of house To find a list of applicable median income amounts, go online us for this form. This list may also be available at the bankruptcy cl	sing the link specifie	ed i	n the separa	ate instruc	tions	13.	\$	77,491.00
14.	How do the lines compare?								
	14a. Line 12b is less than or equal to line 13. On the top Go to Part 3. Do NOT fill out or file Official Form 12		ох	1, <i>There is</i>	no presun	nption	of abuse).	
	14b. Line 12b is more than line 13. On the top of page 1 Go to Part 3 and fill out Form 122A–2.	, check box 2, The p	pre	esumption of	f abuse is	detern	nined by	Form 1	22A-2.
art	3: Sign Below								
	By signing here, I declare under penalty of perjury that the	information on this s	sta	tement and	in any att	achme	nts is tru	ie and c	correct.
	X /s/ Ernie Donshay Miller Ernie Donshay Miller	_							
	Signature of Debtor 1								
	Date December 11, 2019								
£: _:	al Form 122A-1 Chapter 7 Statement	t of Vour Current M		sthly Incom					page

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			12/11/19 12:07PM
Debtor 1	Ernie Donshay Miller	Case number (if known)	
	MM/DD/YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

Fill in this information to identify your case:	Check the appropriate box as directed in
Debtor 1 Ernie Donshay Miller	lines 40 or 42:
Debtor 2	According to the calculations required by this Statement:
(Spouse, if filing)	
United States Bankruptcy Court for the: Southern District of Mississippi	■ 1. There is no presumption of abuse.
Case number(if known)	☐ 2. There is a presumption of abuse.
(ii naviiii)	Погражения при
	☐ Check if this is an amended filing
Official Form 122A 2	

Official Form 122A - 2

Chapter 7 Means Test Calculation

04/19

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any

	1: Determine Your Adjusted Income				
1.	Copy your total current monthly income. Copy line	11 from Official Form 122	A-1 here=>	\$	7,182.14
2.	Did you fill out Column B in Part 1 of Form 122A-1?				
	□ No. Fill in \$0 for the total on line 3.				
	■ Yes. Is your spouse Filing with you?				
	■ No. Go to line 3.				
	☐ Yes. Fill in \$0 the total on line 3.				
	Adjust your current monthly income by subtracting any part of you household expenses of you or your dependents. Follow these steps		ed to pay for the		
	On line 11, Column B of Form 122A–1, was any amount of the income expenses of you or your dependents?	you reported for your spouse	NOT regularly used	for the hou	ısehold
	No. 5:11 in O for the total on line 2				
	No. Fill in 0 for the total on line 3.				
	Yes. Fill in the information below:				
	_	Fill in the amoun			
	■ Yes. Fill in the information below:	ana ambanastina fi	rom		
	■ Yes. Fill in the information below: State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt of	are subtracting fi	rom		
	■ Yes. Fill in the information below: State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt o support other than you or your dependents.	are subtracting fr your spouse's inc	rom		
	■ Yes. Fill in the information below: State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt o support other than you or your dependents. Payroll deductions	are subtracting fryour spouse's inc	rom		
	■ Yes. Fill in the information below: State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt of support other than you or your dependents. Payroll deductions	are subtracting fryour spouse's incessed as \$ 650.11	rom		
	■ Yes. Fill in the information below: State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt o support other than you or your dependents. Payroll deductions	are subtracting fryour spouse's incessed as \$ 650.11	rom	· - \$	650.11
	■ Yes. Fill in the information below: State each purpose for which the income was used For example, the income is used to pay your spouse's tax debt of support other than you or your dependents. Payroll deductions	are subtracting fryour spouse's incessed as \$ 650.11	rom come	_	650.1° 6,532.03

Ernie Donshay Miller Debtor 1 Case number (if known) Part 2: Calculate Your Deductions from Your Income The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office. Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted fro your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from in income in lines 5 and 6 of form 122A-1. If your expenses differ from month to month, enter the average expense. Whenever this part of the from refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in. The number of people used in determining your deductions from income Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from 5 the number of people in your household. **National Standards** You must use the IRS National Standards to answer the guestions in lines 6-7. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National 2,206.00 Standards, fill in the dollar amount for food, clothing, and other items. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older-because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22. People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 55.00 7b. Number of people who are under 65 5 275.00 275.00 7c. Subtotal. Multiply line 7a by line 7b. Copy here=> People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114.00 7e. Number of people who are 65 or older 0 7f. **Subtotal.** Multiply line 7d by line 7e. 0.00 Copy here=> +\$ 0.00 7g. Total. Add line 7c and line 7f 275.00 Copy total here=> 275.00

Debtor 1 Ernie Donshay Miller

Case number (if known)

Loc	al Sta	andards	You must use the IRS Local Sta	andards to ansv	wer the question	ns in lin	es 8-15.				
			on from the IRS, the U.S. Trus es into two parts:	stee Program l	has divided th	e IRS L	ocal Standa	ard for housi	ng for		
■ H	lousi	ing and uti	lities - Insurance and operatin	ng expenses							
=	lousi	ing and uti	lities - Mortgage or rent exper	nses							
Тоа	answ	er the ques	stions in lines 8-9, use the U.S	S. Trustee Pro	gram chart.						
			online using the link specified ir be available at the bankruptcy c		instructions for	this forr	m.				
8.			ntilities - Insurance and operate ount listed for your county for in						5, fill		689.00
9.	Hou	ising and u	ıtilities - Mortgage or rent exp	enses:							
	9a.	-	number of people you entered in our county for mortgage or rent					\$	980.00		
	9b.	Total avera	age monthly payment for all mo	rtgages and oth	her debts secur	ed by y	our home.				
		contractua	te the total average monthly pay ally due to each secured creditor ptcy. Then divide by 60.								
		Name of the	ne creditor		Average mont payment	hly					
		-NONE-			\$						
										Repeat this	
			Total average monthly	y payment	\$	0.00	Copy here=>	-\$	0.00	amount on line 33a.	
	9c.	Net mortga	age or rent expense.								
			ne 9b (total average monthly papense). If this amount is less that				\$	980.00	Copy here=>	\$	980.00
10.			at the U.S. Trustee Program's culation of your monthly expe					g is incorrec	t and	\$	0.00
	Ex	plain why:									
11.	Loc	al transpor	rtation expenses: Check the nu	umber of vehicl	es for which yo	u claim	an ownersh	ip or operatin	g expense.		
). Go to line	14.								
	□ 1	. Go to line	12.								
	2 2	or more. G	Go to line 12.								

Official Form 122A-2

12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the

operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area.

420.00

Debtor 1	Ernie Donshay Miller		Case number (if known)	
	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.			
Vel	Describe Vehicle 1: 2012 Acura TSX 93,000	miles		
13a.	Ownership or leasing costs using IRS Local Standard		\$ 508.00	
13b.	Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles.			
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mont bankruptcy. Then divide by 60.		at	
	Name of each creditor for Vehicle 1	Average monthly payment		
	Jackson Area Fcu	\$ 236.24		
	Total Average Monthly Payment	\$\$	Copy here => -\$ 236	Repeat this amount on line 33b.
	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this amount is less than \$0 nicle 2 Describe Vehicle 2:	, enter \$0	\$ 271.76	Vehicle 1 expense here => \$ 271.76
13d.	Ownership or leasing costs using IRS Local Standard		\$	
13e.	Average monthly payment for all debts secured by Vehicle 2. leased vehicles.	. Do not include costs fo	or	
	Name of each creditor for Vehicle 2	Average monthly payment		
	-NONE-	_ \$		
	Total Average Monthly Payment	\$	Copy here => -\$ 0.00	Repeat this amount on line 33c.
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this amount is less than \$0	, enter \$0	\$0.00	Copy net Vehicle 2 expense here => \$ 0.00
14.	Public transportation expense: If you claimed 0 vehicles in <i>Transportation</i> expense allowance regardless of whether you			Public \$ 0.00
	Additional public transportation expense: If you claimed a also deduct a public transportation expense, you may fill in wonot claim more than the IRS Local Standard for <i>Public Trans</i> ,	hat you believe is the a		

Case number (if known)

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In addition to the expense deductions listed above, you are allowed your monthly expenses for Other Necessary Expenses the following IRS categories. 16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, self-employment taxes, Social Security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. 625.53 Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 421.59 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than 0.00 term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 0.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or 0.00 for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 0.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment 0.00 expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted. 5,888.88 24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.

Ernie Donshay Miller

Debtor 1

Ernie Donshay Miller Debtor 1 Case number (if known) **Additional Expense Deductions** These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. Health insurance 175.66 Disability insurance 0.00 0.00 Health savings account 175.66 175.66 Total Copy total here=> Do you actually spend this total amount? No. How much do you actually spend? \$ 26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may 0.00 include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b). 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. 0.00 By law, the court must keep the nature of these expenses confidential. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional 0.00 amount claimed is reasonable and necessary. 29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$170.83* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23. 0.00 * Subject to adjustment on 4/01/22, and every 3 years after that for cases begun on or after the date of adjustment. 30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. 0.00 You must show that the additional amount claimed is reasonable and necessary. 31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial 560.00 instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2). 735.66 32. Add all of the additional expense deductions. \$ Add lines 25 through 31.

Case number (if known)

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Deductions for Debt Payment 33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Average monthly Mortgages on your home: payment 33a. Copy line 9b here 0.00 Loans on your first two vehicles: 33b. Copy line 13b here 236.24 33c. Copy line 13e here 0.00 List other secured debts: 33d. Name of each creditor for other secured debt Identify property that secures the debt Does payment include taxes or insurance? No **OneMain Financial** 2005 Honda Accord 223,000 miles 98.42 Yes No П Yes ☐ No ☐ Yes Сору total 334.66 334.66 33e. Total average monthly payment. Add lines 33a through 33d here=> 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure Monthly cure amount amount -NONE- $\div 60 =$ \$ Сору total 0.00 0.00 Total \$ here=> \$ 35. Do you owe any priority claims such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims_____ \$ **0.00** \div 60 = \$

Ernie Donshay Miller

Debtor 1

Case number (if known)

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36. Are vou	u eligible to file a case under Chapter 13? 11 U.S.C. §	109(e).					
	re information, go online using the link for <i>Bankruptcy Bas</i> ons for this form. <i>Bankruptcy Basics</i> may also be availab						
□ No.	Go to line 37.						
Yes	. Fill in the following information.						
	Projected monthly plan payment if you were filing under	er Chapter 13	3	\$	955.24	<u>. </u>	
	Current multiplier for your district as stated on the list is Administrative Office of the United States Courts (for d and North Carolina) or by the Executive Office for Unite (for all other districts).	istricts in Ala	abama	x	8.60	_	
	To find a list of district multipliers that includes your dis the link specified in the separate instructions for this fo be available at the bankruptcy clerk's office.					Copy tot	al
	Average monthly administrative expense if you were fil	ing under Cl	hapter 13	\$	82.15	here=>	
	Il of the deductions for debt payment. nes 33e through 36.					_	\$416.81_
Total Dedu	ctions from Income						
38. Add all	of the allowed deductions.						
	ine 24, All of the expenses allowed under IRS se allowances	\$	5,888.88	3			
Copy I	ine 32, All of the additional expense deductions	\$	735.60	6			
Copy I	ine 37, All of the deductions for debt payment	+\$	416.8	1			
	Total deductions	\$	7,041.3	5_ Cop	y total here	=>	\$ 7,041.35
art 3: De	etermine Whether There is a Presumption of Abuse						
39. Calcula	te monthly disposable income for 60 months						
39a. C	copy line 4, adjusted current monthly income	\$	6,532.03	3			
	copy line 38, Total deductions	- \$	7,041.3				
	flonthly disposable income. 11 U.S.C. § 707(b)(2). subtract line 39b from line 39a	\$	-509.32	Cop here	y ≘=>\$	-50	9.32
For the	e next 60 months (5 years)				x 6	0	
39d. T	otal. Multiply line 39c by 60			-30,559	Conv	1 0	-30,559.20
40 Find ou	It whether there is a presumption of abuse. Check the	hox that and	lies.				
_	line 39d is less than \$8,175*. On the top of page 1 of the			ara is no	nracumntic	n of abuse	Go to Part 5
- ine	line 39d is more than \$13,650*. On the top of page 1 of the	•	,				
		•	,				
Part	t 4 if you claim special circumstances. Go to Part 5. Iline 39d is at least \$8,175*, but not more than \$13,650	0 *					

Ernie Donshay Miller

Debtor 1

ebtor 1	Erni	e Donshay Miller	Case	e number (<i>if known</i>)		
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled A Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	n	. \$ x .25		
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(, , ,	\$	Copy here=>	\$
25	% of y	ne whether the income you have left over after subtracting all allowed concurred, nonpriority debt. ne box that applies:	leduc	ctions is enough to pa	ıy	
		39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>T</i> o Part 5.	here i	is no presumption of al	ouse.	
		39d is equal to or more than line 41b. On the top of page 1 of this form, clumption of abuse. You may fill out Part 4 if you claim special circumstances.				
art 4:	Giv	ve Details About Special Circumstances				
		we any special circumstances that justify additional expenses or adjuste alternative? 11 U.S.C. \S 707(b)(2)(B).	ment	s of current monthly i	ncome fo	or which there is no
	No. Go	o to Part 5.				
□ Y		Il in the following information. All figures should reflect your average monthly m. You may include expenses you listed in line 25.	expe	nse or income adjustm	ent for ea	ach
	ne	ou must give a detailed explanation of the special circumstances that make the ecessary and reasonable. You must also give your case trustee documentation lipustments.				
	G	Sive a detailed explanation of the special circumstances		erage monthly expens ncome adjustment	se	
			\$			
	_		\$			
	_		\$			
	_		\$			
art 5:	Sig	gn Below				
	By si	gning here, I declare under penalty of perjury that the information on this star	temer	nt and in any attachme	nts is true	and correct.
		/ Ernie Donshay Miller				
		rnie Donshay Miller gnature of Debtor 1				
Da	ate D e	ecember 11, 2019				
	MI	M/DD/YYYY				

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Mississippi

In re	Ernie Donshay Miller		Case No	-				
		Debtor(s)	Chapter	7				
	DISCLOSURE OF COM	PENSATION OF ATTOR	NEY FOR D	EBTOR(S)				
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:							
	For legal services, I have agreed to accept		\$	1,565.00				
	Prior to the filing of this statement I have receive			390.00				
	Balance Due			1,175.00				
2. \$	335.00 of the filing fee has been paid.							
3. T	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
4. T	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
5. I	I have not agreed to share the above-disclosed c	companyation with any other person a	inless thay are ma	mbors and associates of my law fir	••••			
	-		•	•				
[☐ I have agreed to share the above-disclosed comp copy of the agreement, together with a list of the							
6. I	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
	. Analysis of the debtor's financial situation, and r			o file a petition in bankruptcy;				
	 Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; 							
	. Representation of the debtor in adversary procee	edings and other contested bankruptcy	y matters;					
e.	. [Other provisions as needed] Negotiations with secured creditors	to reduce to market value: exe	mption planning	g: preparation and filing of				
	reaffirmation agreements and applic 522(f)(2)(A) for avoidance of liens on	ations as needed; preparation						
7. B	By agreement with the debtor(s), the above-disclose	ed fee does not include the following	service:					
	Representation of the debtors in any any other adversary proceeding.	y dischargeability actions, judio	ial lien avoidan	ces, relief from stay actions of	r			
		CERTIFICATION			_			
	certify that the foregoing is a complete statement on kruptcy proceeding.	of any agreement or arrangement for	payment to me for	representation of the debtor(s) in				
<u>December 11, 2019</u> <u>Date</u>		/s/ Robert Rex Mc Robert Rex McRa						
Da	ue	Signature of Attorney						
		McRaney & McRa						
		503 Springridge R Post Office Drawe	load or 1397					
		Clinton, MS 39060						
		601-924-5961 Fax	k: 601-924-1516					
		Mama of law firm						